

N. B. The returns from St. Patriek's Cemetery, since the 31st July, not having been duly made, cannot be relied on, except for two weeks, when the books were resorted to by the Secretary, to enable him to make a weekly report. —*New Orleans Medical and Surgical Journal*, Sept. 1853.

*Quinia in Yellow Fever.*—The editor of the *New Orleans Medical and Surgical Journal* states (No. for Sept. 1853) that his "experience during the present epidemic, with the sulphate of quinia, has convinced him that large doses of this salt cannot be relied on in the early stages of the attack.

"In the commencement of the epidemic, the advocates of large doses of quinia soon found that this article, when given in sedative doses, failed to accomplish a cure, although the febrile symptoms gradually gave way to its use.

"As the epidemic progressed, and its type and characteristic symptoms became better known, few, as far as we can learn, ventured to give large and repeated doses of this salt, except in particular instances. In our previous epidemic of yellow fever, the quinia practice succeeded best; but it is generally conceded, as far as we could ascertain, that this season it failed in a majority of cases to sustain its previous high reputation as a powerful curative agent. Hereafter, we shall have more to say on this subject."

*Malformation successfully treated by Operation.*—Dr. GEO. HAYWARD, of Boston, states (*Virginia Med. and Surg. Journ.* July, 1853) that he was desired to examine a female infant, three or four days old, in consequence of a malformation about the anus. On inspection, no external opening of the bowel could be discovered; but, in separating the labia, it was found that the urethra and vagina were perfect, and at two or three lines behind the vagina, there was a small orifice, sufficient to admit the large end of a probe, through which the feces were discharged.

"The child did not seem to suffer at all, and I heard nothing of it for more than a year, though I visited frequently the family to which it belonged. A few days after it was weaned, which was in January last, I was called to visit it, and was told that since the change in its diet it had apparently suffered very much in its efforts to discharge the contents of its bowels. These efforts were violent, almost constant when the child was awake, and afforded scarcely any relief. Since it had ceased nursing, it had become emaciated and very feeble, and had but little continuous or quiet sleep.

"After it was weaned, its diet consisted of milk and barley flour, and the feces, no doubt in consequence of the change in the food, had become of much greater consistence. The contents of the bowels were forced out by violent straining in small pieces, quite solid, about the size of a duck shot.

"On examining the parts, I found that the outlet of the bowel was but little if any larger than when I saw it before, and the large end of a probe did not pass very readily into it. The moment, however, that it was introduced, strong convulsive efforts followed, and it was evident that there was a great accumulation of fecal matter in the intestine, lying in the hollow of the sacrum.

"As it was apparent that the child would not live long in this way, I suggested the expediency of attempting to relieve it by an operation; though I confess that I was not very sanguine as to its success, nor did I give a very favourable prognosis to the parents as to the result. They consented, however, and on the following day, January 26, I performed it in the following way:—

"The child, having been rendered insensible by the inhalation of rectified sulphuric ether, was laid on a table. A director of the smallest size was introduced, though with difficulty, about an inch into the bowel, with the groove towards the sacrum. With a very narrow knife passed into the groove, I enlarged the external opening of the bowel sufficiently to admit my forefinger, and continued the incision upwards nearly to the end of the director; I then found that I could pass my finger readily into the bowel, which appeared to be of the usual size, till within about an inch of its outlet, where it had been contracted into a small canal, certainly not one-fourth as large as the bowel above.

"I did not consider it necessary to carry the incision any farther; nor did I

deem it safe; partly from the fear of hemorrhage, and in part from an apprehension that, if I did so, I should destroy the retentive power of the bowel, as sometimes happens from an operation for fistula in ano, where it has been found necessary to divide the parts high up.

"Lint was applied to the edges of the wound, and a cloth wet in cold water laid over it. There was no bleeding, except a slight one at the time; the child was evidently relieved, though the fecal matter was not discharged till castor-oil was administered on the following day.

"In two days after the operation, I introduced a moderate-sized rectum bougie, of a diameter as large as that of the bowel, and this has been done daily to the present time. In a very few days the wound healed, and the child has apparently suffered no inconvenience since. It has regular evacuations of a proper consistence, without the use of medicine. It has the entire control of the bowel, and has regained its health. It is now as vigorous and active as female children of that age usually are.

"I examined the parts very recently, four months after the operation. The anus can now be seen without separating the labia; but the perineum is covered with the same delicate mucous membrane that lines the vagina. Whether this will ever be productive of inconvenience, it is not perhaps easy to say; it is probable that this membrane may lose some of its sensibility, but there is no reason to suppose that it will acquire the properties of the ordinary covering of the body.

"This case must be regarded as a favourable one of malformation of this kind. In some that have been described, the opening into the vagina was as large as the diameter of the bowel, and there was no sphincter; while here, the lower part of the rectum was contracted into a very narrow canal, furnished with muscular power sufficient to prevent the involuntary discharge of the feces. Where there is no provision of this kind, the malformation must of course be one of the most disgusting character."

*Strychnia in Lead Colic.*—Dr. SWETT called the attention of the New York Medical and Surgical Society (Sept. 18, 1852) to a point in practice, which he brought before their notice a year or two ago—the use of strychnia in lead colic, in moderate doses, say the sixteenth part of a grain, three times a day. This has become the settled practice in the New York Hospital. Relief is usually experienced within forty-eight hours; the bowels act, and the disease subsides. He recalled to mind one case, however, which went four days before relief was afforded. He also related the case of a young Englishman, a clerk in a drug store, who was admitted to the hospital a few weeks ago, with what was at first considered as ordinary colic. After a time, however, the following facts were elicited. It appeared that, upon first opening the store in the morning, he had been in the constant habit of taking a glass of soda-water, which had remained over night in the lead pipe connected with the fountain. Strychnia was used in this case with great success. The doctor stated that, under the use of this drug, he has noticed twitching of the abdominal muscles before a passage from the bowels. He thinks that the disease is consequent upon paralysis of the intestines, and that strychnia, by acting upon the nerves, relieves it.

Dr. Bulkley remarked that he had employed the strychnia treatment in colica pictonum, and stated that since the first of August there had been five cases of the disease successfully treated with that remedy during his attendance in the New York Hospital. He remarked, as a curious fact, that in ordinary paralytic cases the exhibition of strychnia will not affect the bowels.

Dr. B. mentioned a second case which had occurred this summer, from drinking soda-water early in the morning, which had become impregnated with the lead poison by standing in the fountain over night. Also, an obscure case of this disease, now under treatment, in which the patient had suffered for seven or eight years. He was relieved by the use of strychnia, and is rapidly improving.—*New York Medical Times*, Aug. 1853.